pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to **ARDEN COURTS SUSQUEHANNA OF HARRISBURG PA LLC**
LEGAL ENTITY

To operate **ARDEN COURTS (SUSQUEHANNA)**
NAME OF FACILITY OR AGENCY

Located at **2625 AILANTHUS LANE, HARRISBURG, PA 17110**
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE/SERVICE LOCATION

ADDRESS OF SATELLITE SITE/SERVICE LOCATION

ADDRESS OF SATELLITE SITE/SERVICE LOCATION

PROVISIONAL

To provide **Personal Care Homes**
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed **64** (MAXIMUM CAPACITY)
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

Restrictions: **Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 64**

This certificate is granted in accordance with the Human Services Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from **September 8, 2023** until **March 8, 2024**,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **324311**

ISSUING OFFICER

Juliet Marsala
ACTING DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility.

HS 628P – 04/23

pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

MAILING DATE: SEPTEMBER 8, 2023

[redacted]
Arden Courts-Susquehanna of Harrisburg PA LLC
[redacted]

RE: Arden Courts (Susquehanna)
2625 Ailanthus Lane
Harrisburg, Pennsylvania 17110
License #: 324311

Dear [redacted]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Office of Long-term Living), licensing inspections on July 12, 2023 of the above facility, the violations specified on the enclosed Licensing Inspection Summary (LIS) were found.

As a result of violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), the Department hereby REVOKES your certificate of compliance (333790) dated June 20, 2023 to June 20, 2024 and issues you a FIRST PROVISIONAL license to operate the above facility. A FIRST PROVISIONAL license is being issued based on your acceptable plan to correct the violations as specified on the LIS. This decision is made pursuant to 62 P.S. § 1026 (b)(1) and 55 Pa. Code §20.71(a)(2); (5) (relating to conditions for denial, nonrenewal or revocation). Your FIRST PROVISIONAL license is enclosed.

If you disagree with the decision to issue a PROVISIONAL license, you have the right to appeal through hearing before the Bureau of Hearings and Appeals, Department of Human Services in accordance with 1 Pa. Code Part II, Chapters 31-35. Your appeal must indicate the reasons for the appeal, and you must be as specific as possible regarding your areas of disagreement with the Department's decision. If you decide to

appeal, a written request for an appeal must be received within 10 days of the date of this letter by:

[redacted]
Pennsylvania Department of Human Services
Bureau of Human Services Licensing
Room 631, Health and Welfare Building
625 Forster Street
Harrisburg, Pennsylvania 17120
PH: 717-214-1304

This decision is final 11 days from the date of this letter, or if you decide to appeal, upon issuance of a decision by the Bureau of Hearings and Appeals.

Sincerely,



Juliet Marsala
Deputy Secretary
Office of Long-term Living

Enclosure
Licensing Inspection Summaries

cc: [redacted]

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY - PUBLIC

Facility Information

Name: *ARDEN COURTS (SUSQUEHANNA)* **License #:** *32431* **License Expiration:** *06/20/2024*

Address: *2625 AILANTHUS LANE, HARRISBURG, PA 17110*

County: *DAUPHIN* **Region:** *CENTRAL*

Administrator

Name: [redacted] **Phone:** [redacted] **Email:** [redacted]

Legal Entity

Name: *ARDEN COURTS SUSQUEHANNA OF HARRISBURG PA LLC*

Address: [redacted]

Phone: [redacted] **Email:** [redacted]

Certificate(s) of Occupancy

Type: *C-2 LP* **Date:** *01/28/2000* **Issued By:** *Labor & Industry*

Staffing Hours

Resident Support Staff: *0* **Total Daily Staff:** *104* **Waking Staff:** *78*

Inspection Information

Type: *Partial* **Notice:** *Unannounced* **BHA Docket #:**

Reason: *Incident* **Exit Conference Date:** *07/12/2023*

Inspection Dates and Department Representative

07/12/2023 - On-Site: [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *64* **Residents Served:** *52*

Secured Dementia Care Unit

In Home: *Yes* **Area:** *Entire Home* **Capacity:** *64* **Residents Served:** *52*

Hospice

Current Residents: *10*

Number of Residents Who:

Receive Supplemental Security Income: *0* **Are 60 Years of Age or Older:** *52*

Diagnosed with Mental Illness: *0* **Diagnosed with Intellectual Disability:** *0*

Have Mobility Need: *52* **Have Physical Disability:** *0*

Inspections / Reviews

07/12/2023 - Partial

Lead Inspector: [redacted] **Follow-Up Type:** *POC Submission* **Follow-Up Date:** *07/29/2023*

Inspections / Reviews *(continued)*

08/11/2023 - POC Submission

Submitted By: [redacted] **Date Submitted:** *08/15/2023*

Reviewer: [redacted] **Follow-Up Type:** *POC Submission* **Follow-Up Date:** *08/18/2023*

08/31/2023 - POC Submission

Submitted By: [redacted] **Date Submitted:** *08/15/2023*

Reviewer: [redacted] **Follow-Up Type:** *Enforcement*

42b - Abuse

1. Requirements

2600.
42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On the afternoon of 7/1/23, while attempting to prepare Resident #1 for the evening meal, Resident #1 became agitated and aggressive towards Staff Person A and B. As a response to this behavior, Staff Person A took a pillow from the bed and placed it over the Resident's face with the left hand while attempting to hold down [redacted] arms and keep them from flailing with their right hand. Staff Person A held the pillow in Resident 1's face for approximately 15 seconds while attempting to check the [redacted]

Plan of Correction ***Directed [redacted] - 08/16/2023)***

-Immediately following the claim, Staff Person A was put on administrative leave on 7/2/2023 pending investigation.
-Resident 1's POA was notified immediately
-On 7/3/2023, Executive Director and Director of Nursing followed all protocols and reported claim to Susquehanna Township PD, Dauphin County AAA, and PA DHS.
-Staff Member B was re-educated on mandating reporting time frames and processes on 7/3/2023
-Staff Member A was terminated from [redacted] position on [redacted]/2023 following the completion of DHS Complaint Survey.
-All staff members were educated on OAPSA Resident Rights, and Mandated Reporting during monthly staff meeting on 8/1/2023.
-All new staff members will be trained on OAPSA, Resident Rights, and Mandated Reporting in General Orientation.
-All existing staff members will be trained on OAPSA, Resident Rights, and Mandated Reporting annually.

(Directed)
- All staff will receive training specific to working with individuals with dementia to include positive interventions, de-escalation techniques that do not include physical interventions. This training will be conducted by an outside training source who is an expert in the field and be completed by 10/2/23. The training should be a minimum of 2 hours, documentation of the completed training and accompanying sign in sheet/training agenda will be submitted to the Department upon completion. Additional dementia specific trainings will be conducted by an outside training source for all staff on a quarterly basis.
-Beginning 9/1/23, all reportable incidents involving resident rights violations, suspected abuse from resident to resident or from staff to resident will be reviewed by the Administrator within 24 hours of the incident occurring. The Administrator will be responsible for initial review and remediation according to the home's policies and procedures and consistent with the 2600 regulations, Adult Protective Services Law and Older Adult Protective Services Law.
-All reportable incidents will be reviewed quarterly as part of the home's quality management plan, to ensure correct remedial action is taken and staff are receiving adequate training and supervision to complete their job duties.
-The home will develop and implement a policy pertaining to identifying and reporting abuse timely by 9/15/23. All staff will be trained in this policy by 10/2/23, documentation verifying the training will be kept by the home and available upon the Department's request.

Directed Completion Date: *10/02/2023*

202 - Prohibitions

2. Requirements

2600.
202. The following procedures are prohibited:
6. A manual restraint, defined as a hands-on physical means that restricts, immobilizes or reduces a resident's ability to move his arms, legs, head or other body parts freely, is prohibited. A manual restraint does not include prompting, escorting or guiding a resident to assist in the ADLs or IADLs.

Description of Violation

On the afternoon of 7/1/23, while attempting to prepare Resident #1 for the evening meal, Resident #1 became agitated and aggressive towards Staff Person A and B. As a response to this behavior, Staff Person A took a pillow from the bed and placed it over the Resident's face with the left hand while attempting to hold down [redacted] arms and keep them from flailing with their right hand. Staff Person A held the pillow in Resident 1's face for approximately 15 seconds while attempting to check the Resident's [redacted].

Plan of Correction ***Directed [redacted] - 08/16/2023)***

-Immediately following the claim, Staff Person A was put on administrative leave on [redacted] 2023 pending investigation.
-Resident 1's POA was notified immediately
-On 7/3/2023, Executive Director and Director of Nursing followed all protocols and reported claim to Susquehanna Township PD, Dauphin County AAA, and PA DHS.
-Staff Member B was re-educated on mandating reporting time frames and processes on 7/3/2023.
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(Directed)

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202 - Prohibitions (continued)

Directed Completion Date: *10/02/2023*